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DPHHS HAN Advisory

Distributed via the DPHHS Health Alert Network (HAN) System
Friday, May 11, 2007 11:30 MT (11:30 PM MST)

Influenza-Associated Pediatric Mortality and the Increase of *Staphylococcus aureus* Co-infection in the U.S.

Action Requested

- Consider the possibility of bacterial co-infection among children with influenza
- Submit bacterial cultures when bacterial co-infection is suspected
- Contact local health department as soon as possible when deaths among children due to lab-confirmed influenza are identified
- Cases of pediatric influenza-associated deaths should be promptly reported to the state health department

Background

Surveillance by CDC for influenza-associated pediatric mortality has shown an increase in the number of deaths in which both influenza and pneumonia or bacteremia due to *S. aureus* were identified. Only one influenza and *S. aureus* co-infection was identified in 2004-2005, and 3 were identified in 2005-2006. Of the 16 children reported with *S. aureus* so far in 2006-2007, 11 children had methicillin-resistant (MRSA) isolated from a sterile site (9) or sputum (2), and 5 had methicillin-susceptible *S. aureus* isolated from a sterile site (3) or sputum (2). The median age of children with *S. aureus* co-infection was older than children without *S. aureus* co-infection (11 years versus 4 years, $p < .01$). Children with influenza and *S. aureus* co-infections were reported to be in good health before illness onset but progressed rapidly to severe illness. Influenza strains isolated from these children have not been different from common strains circulating in the community and the MRSA strains have been typical of those associated with MRSA skin infection outbreaks in the United States.

Healthcare providers should be alerted to the possibility of bacterial co-infection among children with influenza, and request bacterial cultures when bacterial co-infection is suspected. Clinicians, clinical agencies and medical examiners are asked to contact their local or state health department as soon as possible when deaths among children due to laboratory-confirmed influenza are identified. CDC is interested in receiving *S. aureus* isolates to better characterize those from fatal cases of influenza in children.

If you have any questions about this Health Advisory, please call the DPHHS Communicable Disease Epidemiology Section at 406 444-0273 or the CDC Influenza Division, Epidemiology and Prevention Branch at 404-639-3727.

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The goal of Montana's Health Alert Network is to transmit information to local public health authorities as quickly as possible, and assign a suitable priority to the message that is sensitive to the impact of a health-related event providing information of immediate utility relative to the public health and safety of Montanans. For questions or comments relative to Montana's HAN system you may contact the Montana State HAN Coordinator, Gerry Wheat at <mailto:gwheat@mt.gov>

Categories of Health Alert messages:

Health Alert: conveys the highest level of importance; warrants immediate action or attention.
Health Advisory: provides important information for a specific incident or situation; may not require immediate action.
Health Update: provides updated information regarding an incident or situation; unlikely to require immediate action.

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